| NORTHERN | TATES DISTRICT DISTRICT OF CAI CAND 435 AND Rev. 04/2018) | TRANSCRIPT ORDER Please use one form per court reporter. CJA counsel please use Form CJA24 Please read instructions on next page. | | | | | | | | | | COURT USE ONLY DUE DATE: | | | | | |
|--|--|--|---|-----------------|----------------|--|---|----------------------|------------------|----------------------|--|------------------------------------|--------------------------------|---------------------|-------------------|----------|--|
| 1a. CONTACT PERSON FOR THIS ORDER2a. CONTACT PHONELeeya Kekona, Legal Assistant(510) 637-37 | | | | | | | | | | | | ul ADDRESS cona@usdoj.gov | | | | | |
| 1b. ATTORNEY NAME (if different) 2b. ATTORNEY PHON (510) 637-36 | | | | | | | | | | | | | AIL ADDRESS leman@usdoj.gov | | | | |
| 4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) U.S. Attorney's Office 1301 Clay Street, #340S Oakland, CA 94612 | | | | | | 5. CASE NAME United States v. Ray Garcia | | | | | | | 6. CASE NUMBER 21-CR-429 YGR | | | | |
| 7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ ☐ FTR Pamela Batalo Hebel | | | | | | | 8. THIS TRANSCRIPT ORDER IS FOR: APPEAL | | | | | | | | | | |
| 9. TRANSCRIPT | T(S) REQUESTED (S | Specify portion | on(s) and date(s) of proce | eeding | (s) for which | transcript i | is requested |), format(s) & | & quantity ar | d delivery | type: | | | | | | |
| a HEARING(S) TOR PORTIONS OF HEARINGS) | | | | | | | FORMAT(S) (NOTE: ECF access is included rchase of PDF, text, paper or condensed.) | | | | c. DELIVERY TYPE (Choose one per line) | | | | | | |
| DATE | JUDGE (initials) | TYPE (e.g. CMC) | PORTION If requesting less than full hea specify portion (e.g. witness or | aring, time) | PDF (email) | TEXT/ASCII (email) | PAPER | CONDENSED (email) | ECF ACCESS (web) | ORDINARY (30-day) | 14-Day | EXPEDITED (7-day) | 3-DAY | DAILY (Next day) | HOURLY (2 hrs) | REALTIME | |
| 03/22/2023 | YGR | SENT | | | | 0 | 0 | 0 | 0 | 0 | 0 | • | 0 | 0 | 0 | 0 | |
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| | | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 10. ADDITIONA | AL COMMENTS, INS | STRUCTIONS | , QUESTIONS, ETC: | | | | | | | | | | | | | | |
| ORDER & CERT | RDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). 1. SIGNATURE /s/ Molly K. Priedeman, AUSA | | | | | | | | | | | | 12. DATE 03/23/2023 | | | | |
| | | | | | | | | | | | | | | | | | |